## MONTANA CHEMICAL DEPENDENCY CENTER

## TREATMENT PHILOSOPHY

Montana Chemical Dependency Center is the single state in patient residential treatment facility and as such we accept the responsibility to set a standard of treatment that is respected and emulated within the state. The staff of MCDC will perform their duties at the highest level of professionalism, applying our treatment consistent with the American Society of Addiction Medicine, Level III.7 care.

- First, foremost and always, patients will be treated with respect, dignity and understanding.
- We teach and promote patient accountability, responsibility and honesty.
- We apply defined and readily identifiable clinical consistency in all aspects of our treatment methods.
- We will respect and treat our patients as individuals and refrain from any categorical classifications, assumptions or actions.
- We provide patient focused treatment, respecting their choices, concerns and individual needs and expectations for their own treatment.
- Patients experiencing co-occurring addiction and psychiatric disorders are the expectation, not the exception.
- We understand and accept the complexity of dysfunction and pain inherent in patients who struggle with multiple disorders and do not place unrealistic expectations on them, or ourselves, for rapid progression in treatment; we maintain sensitivity to patient needs and respond to them professionally, effectively and efficiently.
- We consistently educate ourselves, becoming skilled in the application of leading edge treatment modalities, never relying on historical methods as being totally adequate.
- We will refrain from utilizing any elements of: intimidation, degradation, humiliation, confrontation, interrogation, manipulation, threats of reprisal, ultimatums, vulgar or other inappropriate language or behavior, anger, fear, or punitive measures, in any aspects of our treatment or interactions with patients.
- We will refrain from personalizing how a patient behaves or progresses while in our care; only professional perspectives may be applied.
- Our treatment will not be prescriptive; we will transfer patients to an alternate level of care based on documented clinical evidence of changes in symptom severity, identified in the interdisciplinary treatment plan, which warrants the alternate level of care.
- We embrace professional differences, utilizing it to gain multiple perspectives that assist us in making the most effective decisions for quality patient care.
- We value and respect the effective and appropriate use of prescribed medication to assist our patients in obtaining both psychiatric and physical stability for diagnosed disorders.
- We do not represent ourselves as authoritarian or in control of the outcome of a patient's life; we simply provide a source of guidance, suggestions, support, education, insight and possible alternatives.
- We do not have to agree with the choices a patient makes for their life, but we do have to accept it.

- We will always provide professional, timely, effective and individualized interventions to assist patients who may be struggling with retention in treatment.
- We value a patients potential and strive to assist them in recognizing and capitalizing on that potential to assist them in successful treatment and recovery.
- Patients are in treatment to learn how to more effectively live their lives; we do not expect them to have all the answers or appropriate behaviors; that is why they are in treatment.
- Consistent and effective interdisciplinary communication and cooperation is a fundamental imperative for effective patient treatment; no one individual or discipline has overall authority or priority.
- We understand and accept that a critical element of treatment is educating the patient in making effective and productive choices and changes which is accomplished by focusing on positive rather than negative skills, attitudes and behaviors.
- Patients are not denied admission or dismissed from treatment based on any one individual's decision; rather, interdisciplinary input is acquired and documented, resulting in a comprehensive decision with the Administrator retaining final authority if necessary or required.